POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*MB*	*739*	*7027*
O.I.P.E. CLASSIFIER			7-5-00
FORMALITY REVIEW		65372	8-16-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date								
Final	Original	9/7/01	b₁	1/2/02						
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Claim		Date								
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If more than 150 claims or 10 actions
staple additional sheet here

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